24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Scł	nedule E)			PAGE 1 OF 2 FOR SE OF FORM 24/48	
VAN	IE OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼	
Er	iding Spending Action Fund				
				C C00489856	
Check if 24-hour report					
Т	Full Name of Payee		Date of	of Public Distribution/Dissemination	
ı	American Media & Advocacy Group			04	
	Mailing Address 815 Slaters Lane		Amour	nt	
ŀ	City State Zip Code			150075.00	
	Alexandria VA	22314		action ID : SE.5266 If Disbursement or Obligation	
	Purpose of Expenditure media placement	Category/ Type		03 28 2014	
ŀ	Name of Federal Candidate	Support	Office Sought	t: House District:	
	Mary Michelle Nunn	X Oppose	Preside		
	Calendar Year-To-Date Per Election for Office Sought	50075.00	Disbursement 2014 Of	t For: Primary X General	
Γ	Full Name of Payee		Date of	of Public Distribution/Dissemination	
ı	DDC Advocacy			04 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Mailing Address 174 Waterfront Street, Suite 500		Amou	nt	
ŀ	City State	Zip Code		22271.68	
	National Harbor MD	20745		ction ID : SE.5271 If Disbursement or Obligation	
	Purpose of Expenditure direct mail services	Category/ Type	M	04 01 2014	
ŀ	Name of Federal Candidate	Support	Office Sough	t: X House District: 03	
	Walter B. Jones	Oppose	Preside	NC NC	
	Calendar Year-To-Date Per Election for Office Sought	197229.22	Disbursemen 2014 O	t For:	
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(0	c) TOTAL Independent Expenditures		•		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	Nancy H. Watkins [Electronic Signature]	ically Filed] Date	04 /	02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	g				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
Ending Spending Action Fund	C C00489856				
Check if 24-hour report X 48-hour report New report Amends report filed on					
Full Name of Payee Neylan & Partners	Date of Public Distribution/Dissemination				
Mailing Address 9401 Brookmay Court	04 01 2014				
	Amount				
City State Zip Code	19289.00				
Alexandria VA 22309	Transaction ID : SE.5253 Date of Disbursement or Obligation				
Purpose of Expenditure media placement Category/ Type	03 / 26 / Y Y Y Y Y				
Name of Federal Candidate Support Office	e Sought: X House District:03				
Walter B. Jones Oppose	President Senate State: NC				
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	Ursement For:				
Full Name of Payee	Date of Public Distribution/Dissemination				
Rick Reed Media, Inc.	04 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 2601-A Wilson Blvd.	Amount				
City State Zip Code	14845.51				
Arlington VA 22201	Transaction ID : SE.5267 Date of Disbursement or Obligation				
Purpose of Expenditure media production Category/ Type	04 01 / 2014				
Name of Federal Candidate Support Office	e Sought: House District:				
Mary Michelle Nunn Oppose	President Senate State: GA				
Calendar Year-To-Date Per Election for Office Sought Disb. 2014	ursement For:				
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	206481.19				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Bato	04 02 2014				
Signature					